Report of Lost SPAWARSYSCEN Norfolk Identification Badge Grade/Rate/Rank Name Phone Extension SSN Code Company Name (contractor only) When was the badge lost? How did you lose the badge? Steps you have taken to recover the badge. **Date** Employee Signature Authorization to issue new badge. Date Signature of Supervisor _____ Date ____ Signature of Security Officer _____ **Security Office** Lost Identification Badge Number _____ Lost Proximity Pass Number New Identification Badge Number_____ Issue Date:

Issue Date:

SPAWARSYSCEN NORFOLK 5512/1 (REV. 4/03)

New Proximity Pass Number